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Effect	Complete if Known						
Effective.on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number 10/57		10/570,047-Cc	/570,047-Conf. #8165	
FEE TRANSMITTAL			Filing Date	F	April 16, 2007		
For FY 2008			First Named Inve	entor F	Rolf Jessberger		
101112000			Examiner Name	1	Not Yet Assigned		
X Applicant claims small entity status. See 37 CFR 1.27			Art Unit 1		635		
TOTAL AMOUNT OF PAYMENT (\$) 210.00			Attorney Docket No. 29636/39363A				
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
x Deposit Account Deposit Account Number: 13-2855 Deposit Account Name: MARSHALL, GERSTEIN & BORUN LLP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
X Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATION	*						
1. BASIC FILING, SEARC							
	FILIN	G FEES SEA Small Entity	ARCH FEES	EXAMIN	ATION FEES		
Application Type	Fee (\$)	Fee (\$) Fee (\$	Small Entity ) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)
Utility	310	155 510	255	210	105		
Design	210	105 100	50	130	65		
Plant	210	105 310	155	160	80		
Reissue	310	155 510	255	620	310		
Provisional	210	105 0	0	0	0		
2. EXCESS CLAIM FEES Small Entity							
Fee Description Each claim over 20 (including Reissues)						Fee (\$) 50	Fee (\$) 25
Each independent claim over 3 (including Reissues)						210	105
Multiple dependent claims				370	185		
Total Claims			Paid (\$)	Multiple Dependent Claims			
- 150 x =						ee Paid (\$)	
HP = highest number of total cl	aims paid for, if g	reater than 20.					_
	Extra Claims Fee (\$) Fee Paid						
- 19 = HP = highest number of indepe			0.00				
3. APPLICATION SIZE FE If the specification and d listings under 37 CFR	E rawings excee 1.52(e)), the	d 100 sheets of paper	e is \$260 (\$130 fc				
	Extra Sheets		• •	ion thereof	Fee (\$)	Fee P	aid (\$)
Total Sheets							
4. OTHER FEE(S)  Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing s	urcharge):						
SUBMITTED BY							
Signature	Registration No. (Attorney/Agent) 53,0				Telephone (312) 474-6300		
me (Print/Type) Lynn L. Janulis					Date October 31, 2007		

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: October 31, 2007

Signature:

(Lynn L. Janulis, Ph.D.)